

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS           | ID NO.             | DATE     |
|---------------------------|--------------------|--------------------|----------|
| FEE DETERMINATION         | <i>[Signature]</i> | <i>[Signature]</i> | 06-06-01 |
| O.I.P.E. CLASSIFIER       |                    |                    | 07/20    |
| FORMALITY REVIEW          | ST                 | 1021               | 08/03/01 |
| RESPONSE FORMALITY REVIEW | TAD                | 1110               | 8-31-01  |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

| Claim          | Date    |
|----------------|---------|
| Final Original |         |
| 1              | 12-5-03 |
| 2              | ✓       |
| 3              | ✓       |
| 4              | ✓       |
| 5              | ✓       |
| 6              | ✓       |
| 7              | ✓       |
| 8              | ✓       |
| 9              | ✓       |
| 10             | ✓       |
| 11             | ✓       |
| 12             | ✓       |
| 13             | ✓       |
| 14             | ✓       |
| 15             | ✓       |
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| Claim          | Date |
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| Claim          | Date |
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Best Available Copy

If more than 150 claims or 10 actions  
 staple additional sheet here

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2686  
 2-8-6  
 08/03/01